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Approved for Under the Paparwork Reduction Act of 1995, no persons are required to respond to a collection of information u

PTO/SB/22 (10-00) trough 10/31/2002. OMB 0651-0031 S. DEPARTMENT OF COMMERCE displays a valid OMB control number. Docket Number (Optional) 18062L-000110US In re Application of PETER C. SIMPSON et al.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

	Application N	umber 09/649,273	Filed August 28, 2000	
,		DFABRICATED CAPILL ROPHORESIS DEVIC		
	Group Art Un 1755	it Examiner BROWN, JENN	NINE M	
This is a request under the reply in the above identified	ne provisions of 37 CFR 1 ied application.	1.136(a) to extend the p	eriod for filing a	外
The requested extension (check time period desire	and appropriate non-smaped):	all-entity fee are as folk	eriod for filing a bws	3
☑ One month (37 CFR 1.17(a)(1)) \$110			\$110	9
☐ Two months (37 CFR 1.17(a)(2))			\$	
☐ Three months (37 CFR 1.17(a)(3)) \$		\$		
☐ Four mon	☐ Four months (37 CFR 1.17(a)(4)) \$		\$	
☐ Five month	hs (37 CFR 1.17(a)(5))		\$	
above is reduced by one-half, and the resulting fee is: \$ 55 . A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Commissioner has already been authorized to charge fees in this application to a Deposit Account. The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430. I have enclosed a duplicate copy of this sheet. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a).				
WARNING: Information be included on this form	n on this form may bec rm. Provide credit card	ome public. Credit ca information and auth	rd information should not orization on PTO-2038.	
June 9, 2	003	Lyn	Lompson	
Date		Lynn M	Signature Thompson, Reg. No. 47,991 Typed or printed name	_
OTE: Signatures of all the invento	rs or assignees of record of the required, see below*.	entire interest or their represer	ntative(s) are required. Submit multiple	е
*Total of forms are	submitted.			

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